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TRANSMITTAN	
FORM	

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

10/817,158 **Application Number** April 2, 2004 Filing Date First Named Inventor Marcelo Daniel Baru Fassio Art Unit 3762 George C. Manuel **Examiner Name** Attorney Docket Number

99999-003368

ENCLOSURES (Check all that apply)					
\boxtimes	Fee Transmittal Form	Drawing(s)	After Allowance Communication to TC		
	Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority	Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD	Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): Cited References; Request for Continued Examination (RCE): Certificate of Mailing.		
		In the event any further fees are necessary to be paid, the Commissioner is authorized to debit Deposit Account No. 19-1351. TURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name 27717 Seyfarth Shaw LVP					
Signature					
Printed name Joseph H. Herron					
Date	November 19, 2007	Reg. No.	53,019		

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

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November 19, 2007 Typed or printed name RoseAnn White Date

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Effective on 12/08/2004. Fees pursuant to the Consolidate Appropriations Act (2005 (H.R. 4818).			Complete If Known				
				Application Number	10/817,	158	
SHEET IK	BND	ATRIM	\ L [Filing Date	April 2,	2004	
و Fo	r FY 2	008	Ī	First Named Inventor	Marcelo	Daniel Baru	Fassio
NOV 2 3 7007 8			Examiner Name	George C. Manuel			
Applicant claims small of	entity status.	See 37 CFR 1.27	Ì	Art Unit	3762		
TOTAL AMOUNT OF PA	YMENT	(\$)990.00		Attorney Docket No.	99999-0	003368	
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METHOD OF PAYMEN	IT (check a	II that apply)					
Check Credit	Card	Money Order	None	Other (please ide	entify): <u>Depo</u>	osit Account	
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under 37 CFR			is of feets,	Credit any over	payments		
WARNING: Information on the information and authorization			it card info	rmation should not be incl	luded on this	form. Provide cred	it card
FEE CALCULATION							
1. BASIC FILING, SEA	ARCH, AND	EXAMINATION	FEES				
•	FILING			CH FEES	EXAMINA	ATION FEES	
		Small Entity		Small Entity		Small Entity	
Application Type	<u>Fee (\$)</u>	Fee (\$)	Fee (\$)	<u>Fee (\$)</u>	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0 _	
2. EXCESS CLAIM FE	ES					<u>Sı</u>	mall Entity
Fee Description						<u>Fee (\$)</u>	<u>Fee (\$)</u>
Each claim over 20 (inc	_	,				50	25
Each independent claim		cluding Reissues)			210	105
Multiple dependent clai				D : 1 (A)		370	185
Total Claims - 20 or HP	Extra Cl	<u>aims </u>	<u> </u>	s Paid (\$)		Multiple Depe Fee (\$)	Fee Paid (\$)
HP = highest number of total c	****						
Indep. Claims							
- 3 or HP		x	=	-11/23 /200/ Sale Ref: 0	ЮООООТТ ИН	H: TATOAT TAG	17158
HP = highest number of independent claims paid for, if greater than 3							
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer							
				due is \$260 (\$130 for	small entity	y) for each addi	tional 50
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)							
- 100 =		/50=		ound up to a whole numb		=	

SUBMITTED BY		
Signature	Registration No. 53,019 (Attorney/Agent)	Telephone 312-460-5000
Name (Print Type) Joseph H. Herron		Date November 19, 2007

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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Other (e.g., late filing surcharge): Request for Continued Examination (RCE)(\$810.00) and IDS (\$180)

Non-English Specification, \$130 fee (no small entity discount)

4. OTHER FEE(S)

Fee Paid (\$)

\$990.00